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8.0 510(K) SUMMARY

Date Prepared: February 26, 2004

SUMMARY OF SAFETY AND EFFECTIVENESS 8.1

Submitted By:

John M. Lindskog General Manager Unomedical A/S Infusion Devices

Aaholmvei 1-3, Osted

DK-4000 Roskilde, Denmark

8.2

Trade/Proprietary Name: Click-On Infusion Set Cover

8.3 Common/Usual Name: Infusion Set Cover

8.4 Classification Name: Intravascular Administration

Set. Accessory

Substantial Equivalence 8.5

The additional Click-on Covers Marketed with the Comfort Subcutaneous Infusion sets are substantially equivalent to the currently marketed Comfort Subcutaneous Infusion sets.

8.6 Intended Use

The Intended Use for the device has not changed. The Unomedical Comfort™ Subcutaneous Infusion Sets with Indwelling Catheters continue to be intended for the infusion and/or injection of fluids into the body below the surface of the skin. The addition of the Click-on Infusion set cover is only cosmetic.

Technological Characteristics 8.7

This modification does not change the technological characteristics of the current product.

Performance Data 8.8

Physical testing confirmed the covers met their specifications.

Conclusion 8.9

Unomedical A/S concludes based on the information presented that the modified product is substantially equivalent to products currently legally marketed in the USA.



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Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

Unomedical A/S
Mr. John M. Lindskog
General Manager
Infusion Devices
Aaholmvej 1-3, Osted
DK-4000 Roskilde, Denmark

Re: K040633

Trade/Device Name: Click-on™ Regulation Number: 880.5440

Regulation Name: Intravascular Administration Set

Regulatory Class: II Product Code: FPA Dated: March 5, 2004 Received: March 10, 2004

Dear Mr. Lindskog:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Office of Compliance at (301) 594-5618. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address http://www.fda.gov/cdrh/dsma/dsmamain.html

Sincerely yours,

Chiu Lin, Ph.D.

Director

Division of Anesthesiology, General Hospital, Infection Control and Dental Devices Office of Device Evaluation Center for Devices and

Radiological Health

Enclosure

INDICATIONS FOR USE

510(k) Number:	K040633
Device Name:	Click-on™
ndications for Use:	The Subcutaneous Infusion Sets with Indwelling Catheters are indicated for the infusion and/or injection of fluids into the body below the surface of the skin.
Concurrence of CDRH, Office of Device Evaluation (ODE)	
Le	sion Sign-Off)
Divis Infec	ion of Anesthesiology, General Hospital, tion Control, Dental Devices
510(k) Number: K04063.3
/	
Prescription Use	or Over-the-Counter Use
(Per 21 CFR 801.109)	